Case 17-02861 Doc 1 Filed 01/31/17 Entered 01/31/17 18:53:24 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Melissa First name Jo Middle name Badalamenti Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0806	

Melissa Jo Badalamenti

Debtor 1

Page 2 of 55 Case number (if known)

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 938 Congdon Ave. Apt#11 Elgin, IL 60120 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Explain. (See 28 U.S.C. § 1408.)

1/31/17 6:52PM

Case 17-02861 Doc 1 Filed 01/31/17 Entered 01/31/17 18:53:24 Desc Main 1/31/17 6:52PM Document Page 3 of 55 Case number (if known) Debtor 1 Melissa Jo Badalamenti Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money

9. Have you filed for bankruptcy within the last 8 years?

■ No.			
☐ Yes.			
District	When	Case number	
District	When	Case number	
District	When	Case number	

order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out

the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

 Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

■ No

П

☐ Yes.

Debtor Relationship to you

District When Case number, if known

Debtor Relationship to you

District When Case number, if known

Case number, if known

11. Do you rent your residence?

☐ No. Go to line 12.

a pre-printed address.

The Filing Fee in Installments (Official Form 103A).

Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Melissa Jo Badalamenti

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Case number (if known)

Par	Report About Any Bu	sinesses \	ou Own	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busin	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code		
	it to this petition.		Check	Check the appropriate box to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	No. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	Io. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Banl Code.				
		☐ Yes.	I am f	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	he hazard?			
	public health or safety? Or do you own any property that needs			iate attention is			
	immediate attention?		needed,	why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
				-	Number, Street, City, State & Zip Code		

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Debtor 1 Melissa Jo Badalamenti

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

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Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Desc Main

1/31/17 6:52PM Page 6 of 55 Case number (if known) Debtor 1 Melissa Jo Badalamenti Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **25,001-50,000** you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Melissa Jo Badalamenti Signature of Debtor 2 Melissa Jo Badalamenti Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on

January 31, 2017 MM / DD / YYYY

Document Melissa Jo Badalamenti

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For your attorney, if you are represented by one

Debtor 1

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Linda G	6. Bal	Date	January 31, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
1 i d = 0 D	1-1			
Linda G. B	aı			
Printed name				
Linda Bal	Law Inc.			
Firm name				
207 N. Wal	Inut Street			
Itasca, IL 6	60143			
Number, Street,	City, State & ZIP Code			
Contact phone	630-285-0255	Email address	LindaBal@att.net	
6202830				
Bar number & St	rate			

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Fill in this inform	nation to identify your					
Debtor 1	Melissa Jo Badalamenti					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number _					_	0
(if known)						Check if this is an
						amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	r original forms, you must fill out a new Summary and check the box at the top of this page.		-
Pa	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,326.76
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,326.76
Pa	t 2: Summarize Your Liabilities		
		Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	31,577.51
	Your total liabilities	\$	31,577.51
Pa	tt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,575.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,550.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Melissa Jo Badalamenti Case numbe

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	I otal cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Desc Main Case 17-02861 Doc 1 Filed 01/31/17 Entered 01/31/17 18:53:24 1/31/17 6:52PM Document Page 10 of 55 Fill in this information to identify your case and this filing: Debtor 1 Melissa Jo Badalamenti First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet 3 1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Uplander Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2007 Debtor 2 only Current value of the Current value of the 103000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another Vehicle currently in name of \$4,000.00 \$0.00 soon to be ex-husband. Title ☐ Check if this is community property (see instructions) will be transferred to the Debtor as part of the divorce proceedings 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00

pages you have attached for Part 2. Write that number here......>>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

De	ebtor 1			2861 adalame	Doc 1	Filed 01/31/17 Document	Entered 01/31/17 18:5 Page 11 of 55 Case number		Desc Main	1/31/17 6:52PM
6.	Exampl No	old goods es: Major a	ppliand			nina, kitchenware				
				Ordinar	ry househo	ld goods and furnis	hings]		
					es: Couch, d ers, 2-nigh		and 4-chairs, 2-beds,			\$265.00
7.	□ No	es: Televis	ng cell p			stereo, and digital equip ia players, games	oment; computers, printers, scanners	s; music c	ollections; electron	ic devices
				Ordinar	ry househo	ld electronics		1		
						10 yo), smart phone and accessories.	, i-pad, desktop and laptop			\$170.00
3.	Exampl		es and follection		paintings, prir rabilia, collec		oks, pictures, or other art objects; sta	amp, coin,	or baseball card c	collections;
9.	Example No	ent for sports, es: Sports, musica Describe	photog Il instrui	graphic, ex		other hobby equipment;	bicycles, pool tables, golf clubs, skis	; canoes a	and kayaks; carper	ntry tools;
10.	Firearn Examp No	ns	s, rifles,	, shotguns	s, ammunitior	ı, and related equipmen	t			
11.	□ No		,	thes, furs,	, leather coats	s, designer wear, shoes	, accessories			
				Necess	ary wearin	g apparel]		\$75.00
12.	□ No			elry, cost	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watche	s, gems, g	jold, silver	
				Gold we jewelry		d, gold bracelet w/	small rubys and costume			\$100.00
13.	Examp ■ No	rm animal ples: Dogs, Describe	cats, b	irds, hors	es					
14.	Any ot	her persoi	nal and	l househo	old items you	u did not already list, i	ncluding any health aids you did r	not list		

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_	Give specific infor				
— 103.	Oive specific filler	maton			
			om Part 3, including	any entries for pages you have attached	\$610.00
	scribe Your Financi				
Do you ow	vn or have any leç	gal or equitable inter	est in any of the follo	wing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No			our home, in a safe dep	posit box, and on hand when you file your petiti	ion
_ 103				Cash	\$20.00
Examp □ No			al accounts; certificates counts with the same in Institution	,	houses, and other similar
_ 100		Checking		,	\$22.60
		17.1. ending in 2	2649 US Balli	1	φ22. 0 0
		Savings - A 17.2. ending in ((\$573.75
		r publicly traded stoo nvestment accounts w	cks ith brokerage firms, mo	oney market accounts	
		Institution or is	ssuer name:		
	ublicly traded sto	ck and interests in ir	scorporated and uning	corporated businesses, including an interes	st in an LLC, partnership, and
■ No	0:				
⊔ Yes.	Give specific infor	mation about them Name of entity:		% of ownership:	
Negoti	<i>iable instruments</i> ir	nclude personal check	s, cashiers' checks, pro	negotiable instruments pmissory notes, and money orders. by signing or delivering them.	
	Give specific infor	mation about them Issuer name:			
21. Retirer <i>Exam</i> µ □ No	ment or pension a ples: Interests in IR	A, ERISA, Keogh, 40	1(k), 403(b), thrift savin	gs accounts, or other pension or profit-sharing	plans
Yes.	List each account	separately. Type of account:	Institution	name:	
		Roth IRA	E*Trade		\$700.41
Your s		repayments deposits you have ma	ade so that you may co	ntinue service or use from a company ectric, gas, water), telecommunications compar	

Debtor 1	Case 17-02861 Do		01/31/17 ument	Entered 01/31 Page 13 of 55	1/17 18:53:24 ase number (if known)	Desc Main	1/31/17 6:52PM
■ Yes.			Institution r	ame or individual:			
	Rental Secu	rity Deposit	Home Pro 926 Cong Elgin, IL		LLC		\$400.00
23. Annuit ■ No □ Yes	ies (A contract for a periodic paym		you, either fo	life or for a number of y	vears)		
26 U.S. ■ No	ts in an education IRA, in an acc C. §§ 530(b)(1), 529A(b), and 529	(b)(1).	-				
☐ Yes				ne records of any interes			
25. Trusts . ■ No	, equitable or future interests in	property (other	than anythin	g listed in line 1), and	rights or powers exe	ercisable for your	benefit
☐ Yes.	Give specific information about th	em					
Examp ■ No —	s, copyrights, trademarks, trade oles: Internet domain names, webs Give specific information about th	ites, proceeds fro			s		
Exam _i ■ No —	nes, franchises, and other general ples: Building permits, exclusive lice. Give specific information about the	enses, cooperati	ve associatio	n holdings, liquor license	es, professional licens	es	
	property owed to you?	OIII				Current val	ue of the
money or	property office to you.					portion you Do not dedu claims or ex	own? act secured
□ No	funds owed to you Give specific information about the	em, including who	ether you alre	ady filed the returns and	I the tax years		
		Anticipated 2	016 income	e tax refunds	Federal and Sta	ite	\$2,000.00
■ No	support ples: Past due or lump sum alimon Give specific information	y, spousal suppo	rt, child supp	ort, maintenance, divorc	e settlement, property	settlement	
Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insur benefits; unpaid loans you ma			efits, sick pay, vacation	pay, workers' comper	nsation, Social Se	curity
31. Interes	Give specific information sts in insurance policies oles: Health, disability, or life insura	ance; health savii	ngs account (HSA); credit, homeowne	er's, or renter's insurar	nce	
■ No □ Yes.	Name the insurance company of e Company n		st its value.	Beneficiary	r:	Surrender value:	or refund

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Case number (if known)

 32. Any interest in property that is due you from someone who has lif you are the beneficiary of a living trust, expect proceeds from a someone has died. ■ No □ Yes. Give specific information 		are currently entitled to rece	eive property because
Tes. Give specific information			
33. Claims against third parties, whether or not you have filed a Examples: Accidents, employment disputes, insurance claims, o		nd for payment	
■ No □ Yes. Describe each claim			
34. Other contingent and unliquidated claims of every nature, in	cluding counterclaims o	of the debtor and rights to	set off claims
■ No			
☐ Yes. Describe each claim			
35. Any financial assets you did not already list			
■ No□ Yes. Give specific information			
36. Add the dollar value of all of your entries from Part 4, include		es you have attached	¢2.740.70
for Part 4. Write that number here			\$3,716.76
Part 5: Describe Any Business-Related Property You Own or Have an Im	nterest In. List any real esta	te in Part 1.	
37. Do you own or have any legal or equitable interest in any business-re	lated property?		
No. Go to Part 6.			
☐ Yes. Go to line 38.			
Part 6: Describe Any Farm- and Commercial Fishing-Related Property Y	ou Own or Have an Interes	t In.	
46. Do you own or have any legal or equitable interest in any far	m- or commercial fishin	g-related property?	
■ No. Go to Part 7.			
☐ Yes. Go to line 47.			
Part 7: Describe All Property You Own or Have an Interest in That	Van Did Nat Liet Above		
Part 7: Describe All Property You Own or Have an Interest in That	TOU DIG NOT LIST Above		
53. Do you have other property of any kind you did not already li Examples: Season tickets, country club membership	ist?		
■ No			
☐ Yes. Give specific information			
54. Add the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
·			
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$0.00
56. Part 2: Total vehicles, line 5	\$0.00		
57. Part 3: Total personal and household items, line 15	\$610.00		
58. Part 4: Total financial assets, line 36	\$3,716.76		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 5261. Part 7: Total other property not listed, line 54	+ \$0.00		
		Communication	
62. Total personal property. Add lines 56 through 61	\$4,326.76	Copy personal property to	otal \$4,326.76
63. Total of all property on Schedule A/B . Add line 55 + line 62			\$4,326.76

Debtor 1

Melissa Jo Badalamenti

	Cas	SC 17-02001 D	Document		Page 15 of 55	1/31/17 6:52PI
Fil	ll in this inform	ation to identify your ca			100 13 OF 33	
De	ebtor 1	Melissa Jo Badala	menti			
_		First Name	Middle Name	L	ast Name	
	ebtor 2 pouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLIN	OIS	
Ca	ase number					
	known)					☐ Check if this is an amended filing
2	fficial For	m 106C				
S	chedule	C: The Pro	perty You Cla	aim	as Exempt	4/16
he nee	property you lis	ted on Schedule A/B: Prattach to this page as m	operty (Official Form 106A/B) as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
any un exe	ecific dollar am y applicable sta ids—may be ur emption to a pa	ount as exempt. Altern itutory limit. Some exer ilimited in dollar amour	atively, you may claim the mptions—such as those fo nt. However, if you claim ar	full fai r healt n exen	th aids, rights to receive certain b option of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	art 1: Identify	the Property You Clain	m as Exempt			
1.	Which set of	exemptions are you cla	iming? Check one only, eve	en if yo	ur spouse is filing with you.	
	You are cla	iming state and federal n	nonbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are cla	iming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Schedu	le A/B that you claim as ex	empt,	fill in the information below.	
		n of the property and line hat lists this property	on Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.		
	Ordinary ho furnishings	usehold goods and	\$265.00		\$265.00	735 ILCS 5/12-1001(b)
	Includes: Co	ouch, chair, kitchen t s, 2-beds, 2-dressers			100% of fair market value, up to any applicable statutory limit	
	2-night stan Line from Scho	ds				
	Ordinary ho	usehold electronics	\$170.00		\$170.00	735 ILCS 5/12-1001(b)
	phone, i-pac	/ (42" 10 yo), smart d, desktop and laptoprinter and accessoriedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
		vearing apparel	\$75.00		\$75.00	735 ILCS 5/12-1001(a)
	Line from Scho	edule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
		ng band, gold bracel and costume jewelr			\$100.00	735 ILCS 5/12-1001(b)
	,	•	-			

☐ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 12.1

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Melissa Jo Badalamenti Case number (if known) Current value of the Brief description of the property and line on Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking - Acct ending in 2649: US 735 ILCS 5/12-1001(b) \$22.60 \$22.60 Bank Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings - Acct ending in 0724: US 735 ILCS 5/12-1001(b) \$573.75 \$573.75 **Bank** Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Roth IRA: E*Trade 735 ILCS 5/12-1006 \$700.41 \$700.41 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Rental Security Deposit: Home** 735 ILCS 5/12-1001(b) \$400.00 \$400.00 **Properties Blackhawk LLC** 926 Congdon Ave. 100% of fair market value, up to Elgin, IL 60120 any applicable statutory limit Line from Schedule A/B: 22.1 Federal and State: Anticipated 2016 735 ILCS 5/12-1001(b) \$2,000.00 \$2,000.00 income tax refunds Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No

_		
1	V Didin- the man-	 1.215 days before you filed this case?

No

Yes 1/31/17 6:52PM

				<u> </u>		
Fill in this infor	rmation to identify your	case:				
Debtor 1	Melissa Jo Badalamenti					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)				☐ Check if this i amended filin		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Document Page 18 of 55 Fill in this information to identify your case: Debtor 1 Melissa Jo Badalamenti Middle Name Last Name First Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 **ADI Pediatric Behavioral Health** 0806 \$690.00 Last 4 digits of account number Nonpriority Creditor's Name 121 S. Wilke Rd., Ste. 403 When was the debt incurred? 1/19/16-11/30/16 Arlington Heights, IL 60005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify medical bill - DOB: 3/21/1968

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Case number (if know)

Hospital Nonpriority Creditor's Name	Last 4 digits of account number 7863	\$698
PO BOX 4249	When was the debt incurred?	
Carol Stream, IL 60197-4249		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent	
_	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify medical bill	
Advocate Lutheran General		
Hospital Nonpriority Creditor's Name	Last 4 digits of account number 9120	\$320
PO BOX 4249 Carol Stream, IL 60197-4249	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify medical bill	
Advocate Lutheran General Hospital	Last 4 digits of account number 2760	\$291
Nonpriority Creditor's Name		
PO BOX 4249	When was the debt incurred?	
Carol Stream, IL 60197-4249 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state of the s	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify medical bill	

Debtor 1 Melissa Jo Badalamenti

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Advocate Lutheran General Hospital	Last 4 digits of account number	\$208.00
Nonpriority Creditor's Name PO BOX 4249	When was the debt incurred?	
Carol Stream, IL 60197-4249 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical bill	
Alexian Brothers Health System	Last 4 digits of account number 6737	\$0.00
Nonpriority Creditor's Name Patient Financial Services 3040 Salt Creek Lane	When was the debt incurred?	
Arlington Heights, IL 60005 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Offeck an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify medical bill	
Allen Gabe Law LLC	Last 4 digits of account number 6718	\$7,575.45
Nonpriority Creditor's Name 1834 Walden Office Square, Ste 500 Schaumburg, IL 60173	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Legal Fees	

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Case number (if know)

Debto	Melissa Jo Badalamenti		Case number (if know)	
4.8	AMITA Health	Last 4 digits of account number	4608	\$105.00
	Nonpriority Creditor's Name 22589 Network Place	When was the debt incurred?		
	Chicago, IL 60673-1225 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical bil	I (Alexian Brothers)	
4.9	CAPITAL ONE BANK USA N	Last 4 digits of account number	5697	\$4,586.00
	Nonpriority Creditor's Name		Opened 04/14 Last Active	
	15000 CAPITAL ONE DR RICHMOND, VA 23238	When was the debt incurred?	1/03/17	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.1 0	HARRIS Nonpriority Creditor's Name	Last 4 digits of account number	4703	\$97.00
	111 WEST JACKSON BOULEVARD CHICAGO, IL 60604	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	· ·	ST COMMUNITY HOSPITAL	
	_ 103	Other. Specify	J. JJIIIII I III III II III II II II II II	

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Case number (if know)

Debt	or 1 Melissa Jo Badalamenti	Case number (if know)	
4.1 1	Harvey M. Wolf, M.D.	Last 4 digits of account number E001	\$600.00
	Nonpriority Creditor's Name 115 S. Wilke Rd., Ste. 300 Arlington Heights, IL 60005	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	■ Other. Specify medical bill	
4.1	Incar-Integgrated Imaging		
2	Consultan	Last 4 digits of account number 8792	\$198.06
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 95040 Chicago, IL 60694-5040	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify MedicalBill	
4.4	Magellan Behavioral Health		
4.1 3	Systems	Last 4 digits of account number 9614	\$180.00
	Nonpriority Creditor's Name		
	PO BOX 1959 Maryland Heights, MO 63043	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical bill	

Document Page 23 of 55 Case number (if know)

Debtor 1 Melissa Jo Badalamenti 4.1 Malcolm Gerald & Assoc. 4123 \$454.00 Last 4 digits of account number 4 Nonpriority Creditor's Name When was the debt incurred? 332 S. Michigan Ave., Ste. 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other, Specify collection St. Alexius Med. Ctr. ☐ Yes 4.1 **MED BUSI BUR** 2504 \$969.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 1460 RENAISSANCE DR When was the debt incurred? **Opened 08/15** PARK RIDGE, IL 60068 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney COMPASS Other. Specify HEALTHCARE CONSULTAN ☐ Yes 4.1 OAC 9315 \$84.00 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 500** When was the debt incurred? **BARABOO**, WI 53913 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify ALLIANCE PATHOLOGY CONSULTAN ☐ Yes

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1/31/17 6:52PM

Debtor 1 Melissa Jo Badalamenti Case number (if know) 4.1 **ONEMAIN FI** 0367 \$11,599.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/15 Last Active 6801 COLWELL BLVD When was the debt incurred? 12/16/16 **IRVING, TX 75039** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.1 **Professional Placement Services** 8774 \$413.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 612 When was the debt incurred? Milwaukee, WI 53201 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No collection Village of Schaumburg ☐ Yes Other. Specify **Ambulance** 4.1 Renee Burke M.D. 3128 \$1,802.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 18 E. Dundee Rd., Bld3 200 When was the debt incurred? Barrington, IL 60010 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify medical bill

Superior Air Ground Amb Serv	Last 4 digits of account number 6052	\$7
Nonpriority Creditor's Name		
PO BOX 1407	When was the debt incurred?	
Elmhurst, IL 60126 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify ambulance run	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ——	0.00
				Ψ	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	31,577.51
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	31,577.51

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		DUGUIIIE	III Paue 20 01 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	Melissa Jo Badal	amenti		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Home Properties Blackhawk LLC Attn: Joyce Prajel 926 Congdon Ave. Elgin, IL 60120	Residential rental Debtor is tenant

	Case 17-02801 L	Docume		01/31/17 18.53.24 if 55	DESC Main 1/31/17 6:52PN
Fill in this	s information to identify your				
Debtor 1	Melissa Jo Badala	amenti			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	her				
(if known)					☐ Check if this is an
					amended filing
Officia	I Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
ill it out, a our name	and number the entries in the e and case number (if known) you have any codebtors? (If v	boxes on the left. Attach . Answer every question	the Additional Page to	o this page. On the top of	ed, copy the Additional Page, any Additional Pages, write
1. 50	you have any codebiors: (ii)	you are ming a joint case, t	io not list ettilet spouse	as a codebior.	
■ No					
☐ Yes	S				
	thin the last 8 years, have you na, California, Idaho, Louisiana,				tes and territories include
■ No.	. Go to line 3.				
	s. Did your spouse, former spou	ise, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only i	f that person is a guaran	or or cosigner. Make s	sure you have listed the ci	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The credito Check all schedules the	or to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			□ Schedule E/F, line	
				☐ Schedule G, line _	
-	Number Street			_	

State

City

ZIP Code

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Fill	in this information to identify your o	case:								
Deb	otor 1 Melissa Jo	Badalamenti								
	otor 2					-				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILL	INOIS		_				
Cas	se number						Check if this	s:		
(If kn	nown)		-					nent sho		petition chapter g date:
<u>O</u> 1	fficial Form 106I						MM / DD/	YYYY		
S	chedule I: Your Inc	ome								12/1
supp spor attac	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. The describe Employment	ı are married and not fili ur spouse is not filing w	ng jointly, ith you, d	and your spo not include i	use is	living ation a	with you, in about your s	clude inf oouse. If	formation f more spa	about your ace is needed,
1.	Fill in your employment information.		Debtor	1			Debto	2 or no	n-filing sp	oouse
	If you have more than one job,			Employed			□ Em	oloyed		
	attach a separate page with information about additional	Employment status	☐ Not e	☐ Not employed Closing Assistant			☐ Not employed			
	employers.	Occupation	Closin							
	Include part-time, seasonal, or self-employed work.	Employer's name	SJF M	arketing Inc.						
	Occupation may include student or homemaker, if it applies.	Employer's address		Roselle Rd. e, IL 60172						
		How long employed t	here?	2.5 years						
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have ı	nothing to repo	rt for ar	ny line	, write \$0 in th	ie space.	. Include y	our non-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the	information fo	r all em	ploye	rs for that per	son on th	ne lines be	low. If you need
						Fo	or Debtor 1		Debtor 2 -filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	3,120.00	\$_		N/A

2.	deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	3,120.00	\$	N/A
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	N/A
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	3,120.00	\$	N/A

Deb	tor 1	Melissa Jo Badalamenti	-	C	Case number (if ki	nown)				
					For Debtor 1			r Debtor n-filing s		
	Cop	by line 4 here	4.		\$3,120	0.00	\$_		N/A	<u>-</u>
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$ 545	5.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c) .	\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	i.	\$	0.00	\$		N/A	_
	5e.	Insurance	5e		. —	0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.		. —	0.00	\$_		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g	,		0.00	+ \$_		N/A N/A	_
•		· · ·	_		<u> </u>		· -			_
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			5.00	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$2,57	5.00	\$_		N/A	_
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	ì.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b).	\$	0.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c) .	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d	ı.		0.00	\$		N/A	_
	8e.	Social Security	8e	€.	\$	0.00	\$_		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.			0.00	\$_		N/A	_
	8g.	Pension or retirement income	8g	,		0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0.00	+ \$_		N/A	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	6(0.00	\$_		N//	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,575.00	+ \$		N/A	= \$	2,575.00
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-	_,0.0.00	1		-1071	. * -	2,010100
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe				-			0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies						e. 12.	\$	2,575.00
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							ly income
	$\overline{\Box}$	Yes. Explain:								

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Fill	in this information to identify y	our case:				
Deb	tor 1 Melissa Jo E	Badalamenti		Che	ck if this is:	
					An amended filing	
	tor 2					ving postpetition chapter
(Spo	ouse, if filing)				13 expenses as of	the following date:
Unit	ed States Bankruptcy Court for the	NORTHERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
1	e number nown)					
Of	fficial Form 106J					
Sc	chedule J: Your	Fxnenses				12/15
Be info	as complete and accurate as	s possible. If two married people are				
Par 1.	t 1: Describe Your House Is this a joint case?	ehold				
	■ No. Go to line 2.					
	☐ Yes. Does Debtor 2 live	in a separate household?				
	□ No	•				
	☐ Yes. Debtor 2 mu	st file Official Form 106J-2, Expenses	s for Separate Household	of Deb	otor 2.	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.		Daughter		18	■ Yes
						□ No
						☐ Yes
						□ No
						☐ Yes
						☐ No
						☐ Yes
3.	Do your expenses include expenses of people other to yourself and your dependent	than No				
Par	t 2: Fstimate Your Ongo	ing Monthly Expenses				
Est exp	imate your expenses as of y enses as of a date after the	rour bankruptcy filing date unless y bankruptcy is filed. If this is a supp				
app	olicable date.					
		non-cash government assistance i				
		nd have included it on <i>Schedule I:</i>)	Your Income		Your exp	enses
(On	ficial Form 106l.)				Tour exp	C113C3
4.	The rental or home owners payments and any rent for the	ship expenses for your residence. In	nclude first mortgage	4. \$	\$	975.00
	If not included in line 4:					
	4a. Real estate taxes			4a. S	\$	0.00
		's, or renter's insurance		4b. S	·	0.00
		epair, and upkeep expenses		4c. S		30.00

4d. \$

5. \$

0.00

0.00

4d. Homeowner's association or condominium dues

Additional mortgage payments for your residence, such as home equity loans

Page 31 of 55 Document Debtor 1 Melissa Jo Badalamenti Case number (if known) **Utilities:** 6a. Electricity, heat, natural gas 6a. \$ 50.00 6b. \$ 6b. Water, sewer, garbage collection 140.00 Telephone, cell phone, Internet, satellite, and cable services 6c. 6c. \$ 200.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 525.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 95.00 Personal care products and services 10. \$ 50.00 11. Medical and dental expenses 11. \$ 50.00 12. Transportation. Include gas, maintenance, bus or train fare. 240.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 110.00 14. Charitable contributions and religious donations 14. \$ 0.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 85.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. 0.00 19 Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 0.00 20a. \$ 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. \$ 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 2,550.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 2,575.00 23b. Copy your monthly expenses from line 22c above. 23b. -\$

23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	

24.	Do you expect an increase of	r decrease in your	expenses within the	year after	you file this form?
-----	------------------------------	--------------------	---------------------	------------	---------------------

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a

modification to the t	ification to the terms of your mortgage?									
■ No.										
☐ Yes.	Explain here:									

25.00

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Fill in t	nis information to	dentify your	case:			
Debtor	1 Melis	sa Jo Badal	amenti			
Dobtoi	First Nan		Middle Name	Last Name		
Debtor						
(Spouse if	, filing) First Nan	e	Middle Name	Last Name		
United S	States Bankruptcy (ourt for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case no	umber					
(if known)						Check if this is an amended filing
f two m	arried people are t	iling togethe enever you f ty by fraud i	n connection with a ban	onsible for supplying on sible for supplying of some some of some of the contract of the contr	correct information. iles. Making a false sta	ntement, concealing property, or 2000, or imprisonment for up to 20
	Sign Below					
Die	d you pay or agree	to pay some	one who is NOT an atto	rney to help you fill o	ut bankruptcy forms?	
	No					
	Yes. Name of pe	rson				nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
	der penalty of perj t they are true and		that I have read the sun	nmary and schedules	filed with this declarat	ion and
Х	/s/ Melissa Jo E	adalament	l	Х		
•	Melissa Jo Bad		1		e of Debtor 2	
	Signature of Debto			-		
	Date January	31, 2017		Date		

						ı	
		nation to identify you					
Deb	tor 1	Melissa Jo Bada First Name	Alamenti Middle Name	Last Name			
Debi	tor 2 se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	Γ OF ILLINOIS			
Case (if kno	e number _						Check if this is an amended filing
Sta Be as	s complete a	of Financial and accurate as possione space is needed,	ible. If two married people attach a separate sheet t	iduals Filing for e are filing together, both a to this form. On the top of	are equally respon	sible for su	
Part	`	n). Answer every que Details About Your Ma	stion. arital Status and Where Yo	ou Lived Before			
		r current marital statu					
	■ Married□ Not mar						
2.	During the la	ast 3 years, have you	lived anywhere other tha	n where you live now?			
	□ No						
	Yes. Lis	st all of the places you l	ived in the last 3 years. Do	not include where you live r	now.		
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1 Debtor 2 Prior	Address:		Dates Debtor 2 lived there
	109 Cedar Schaumbi	Ct. urg, IL 60193	From-To: 2016	☐ Same as Debt	tor 1		☐ Same as Debtor 1 From-To:
	8230 Norti Hanover P	hway Dr. Park, IL 60133	From-To: 1995 to 201 5	☐ Same as Debt	tor 1		☐ Same as Debtor 1 From-To:
Part	No Yes. Ma Explai Did you have Fill in the total If you are fillin No	ies include Arizona, Ca ake sure you fill out Sci in the Sources of You e any income from er al amount of income yo	hedule H: Your Codebtors (Ir Income Inployment or from operative received from all jobs and	legal equivalent in a comm Nevada, New Mexico, Puerto Official Form 106H). ting a business during this d all businesses, including p	o Rico, Texas, Wasl	nington and	Wisconsin.)
			Debtor 1		Debtor 2		
			Sources of income	Gross income	Sources of in	come	Gross income

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

exclusions)

(before deductions and

Check all that apply.

Check all that apply.

(before deductions

and exclusions)

Document

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Case number (if known)

1/31/17 6:52PM

Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$37,170.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$33,043.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year: \$76,038.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For the calendar year: Interest / Dividends \$16.00 (January 1 to December 31, 2014) Unemployment \$10.428.00 **HSA** \$150.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debtor 1

Melissa Jo Badalamenti

Document Page 35 o

Page 35 of 55 Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1° alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner r more of their voting	erships of which you	ou are a genera ny managing a	al partner; corporation gent, including one fo
	NoYes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No		ments or transfer a	ny property on a	eccount of a de	ebt that benefited an
	Yes. List all payments to an insider				_	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Nature of the case Court or agency Case number			Status of the case		
	Paul Badalamenti, Plaintiff vs Melissa Jo Badalamenti,Defendant 2015 D 330307	Dissolution of Marriage	Circuit Court of Cook County, Illinois County Department, Chancery Division		■ Pending □ On appeal □ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	oreclosed, garnis	shed, attached	l, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fir	nancial institutior	n, set off any a	mounts from your
	Creditor Name and Address	Jame and Address Describe the action the creditor took take			action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes		rty in the possessi	ion of an assigne	ee for the bene	efit of creditors, a

Debtor 1 Melissa Jo Badalamenti

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Case number (if known)

Par	t 5: List Certain Gifts and Contributions	s						
13.	Within 2 years before you filed for bankru	uptcy,	did you give any gifts with a total value of more t	han \$600 per person?	•			
	No							
	Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	0	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	■ No		did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or co			_				
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
	or gambling? ■ No □ Yes. Fill in the details.							
		Descr	ibe any insurance coverage for the loss	Date of your	Value of property			
			e the amount that insurance has paid. List pending	loss	lost			
		insura	nce claims on line 33 of Schedule A/B: Property.					
Par	t 7: List Certain Payments or Transfers	3						
16.	consulted about seeking bankruptcy or p	orepari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you			
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid		Description and value of any property	Date payment	Amount of			
	Address Email or website address Person Who Made the Payment, if Not Yo	' 011	transferred	or transfer was made	payment			
	Linda Bal Law Inc. 207 N. Walnut Street Itasca, IL 60143 LindaBal@att.net		Attorney Fees	1/23/2017	\$400.00			
	Linda Bal Law Inc. 207 N. Walnut Street Itasca, IL 60143 LindaBal@att.net		Credit report	1/23/2017	\$50.00			
	Credit Card Management Services II aka DebtHelper.com 4611 Okeechobee Blvd. #114 West Palm Beach, FL 33417	nc	Credit Counseling Class.	1/14/2017	\$24.00			

Debtor 1 Melissa Jo Badalamenti

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Page 37 of 55 Document Case number (if known) Debtor 1 Melissa Jo Badalamenti 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number Address (Number, Street, City, State and ZIP instrument closed, sold, before closing or Code) moved, or transfer transferred **US Bank** XXXX-Unknown 5/2016 Checking **PO BOX 1800** Account closed □ Savings Saint Paul, MN 55101-0800 by Debtor to stop ■ Money Market ACH. Balance □ Brokerage transferred to □ Other current US Bank account.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

■ No

Yes. Fill in the details.

Name of Financial Institution
Address (Number, Street, City, State and ZIP Code)

Who else had access to it?
Address (Number, Street, City,
State and ZIP Code)

Describe the contents

Do you still have it?

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Debtor 1 Melissa Jo Badalamenti

22.	Have you stored property in a storage unit or pla	ace other than your home within	1 year before you filed for bankruptcy?	
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any prope	rty you borrowed from, are storing for,	or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	tion		
For	he purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, groun	- •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s		law, whether you now own, operate, o	r utilize it or used
	Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liable	e under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	·	rironmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Conr	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d ☐ A sole proprietor or self-employed in a tr	•		business?
	☐ A member of a limited liability company		•	
	, , , , , ,	• • • • • • • • • • • • • • • • • • • •	,	

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Del	btor 1	Melissa Jo Badalamenti	Cas	e number (if known)			
		☐ A partner in a partnership					
		☐ An officer, director, or managing ex	ocutive of a corneration				
		☐ An owner of at least 5% of the votine	·				
	_						
No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fill	in the details below for each business.				
		siness Name Iress	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.			
		nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	•			
				Dates business existed			
28.		in 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement to an	yone about your business? Include all financial			
	msu	tutions, creditors, or other parties.					
		No					
	_	Yes. Fill in the details below.					
		ne Iress nber, Street, City, State and ZIP Code)	Date Issued				
Dat	rt 12-	Sign Below					
are with 18 U	true a n a ba J.S.C.	and correct. I understand that making a		eclare under penalty of perjury that the answers staining money or property by fraud in connectior rs, or both.			
		Jo Badalamenti	Signature of Debtor 2				
Sig	ınatur	e of Debtor 1					
Dat	te _J	anuary 31, 2017	Date				
Did	vou a	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?			
	-	nadii additional pages to Tour Stateme	nt of t manoial Analis for marviduals t mily	Tor Barmapley (Sindlar Form 197).			
□ Y							
Diq	vou n	nay or agree to hav someone who is not	an attorney to help you fill out bankruptcy	forms?			
		, 5	an and make you mit out summapley				

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Melissa Jo Badal	amenti		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
ase number known)				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Document Debtor 1 Melissa Jo Badalamenti Case number (if known) name: ☐ Yes ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt:

Part 2: List Your Unexpired Personal Property Leases

Home Properties Blackhawk LLC

Describe your unexpired personal property leases

January 31, 2017

Lessor's name:

Date

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Desc Prop	ription of leased erty:	Residential rental Debtor is tenant					
Unde	Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.						
	/s/ Melissa Jo E Melissa Jo Bad Signature of Debto	alamenti	x	Signature of D	Debtor 2		

Date

Will the lease be assumed?

☐ No

Yes

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	' :	Liquidation
\$2	245	filing fee
\$	675	administrative fee
+ \$	15	trustee surcharge
\$3	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

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If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

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Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-02861 Doc 1 Filed 01/31/17 Entered 01/31/17 18:53:24 Desc Main Document Page 46 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Melissa Jo Badalamenti		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS.	ATION OF ATTOR	NEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy, of	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	400.00
	Prior to the filing of this statement I have received			400.00
	Balance Due		\$	0.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation	ation with any other person u	inless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
6.	In return for the above-disclosed fee, I have agreed to rende	r legal service for all aspects	of the bankruptcy ca	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors a d. [Other provisions as needed] Negotiations with secured creditors to redureaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	ent of affairs and plan which a und confirmation hearing, and uce to market value; exer as needed; preparation a	may be required; I any adjourned hear mption planning;	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any discha any other adversary proceeding.	es not include the following argeability actions, judic	service: ial lien avoidance	es, relief from stay actions or
	C	CERTIFICATION		
this	I certify that the foregoing is a complete statement of any ag bankruptcy proceeding.	reement or arrangement for I	payment to me for re	epresentation of the debtor(s) in
	January 31, 2017	/s/ Linda G. Bal		
_	Date	Linda G. Bal 62028		
		Signature of Attorney Linda Bal Law Inc.		
		207 N. Walnut Stre		
		Itasca, IL 60143	v- 866-285-075 <i>4</i>	
		630-285-0255 Fax LindaBal@att.net	a. 000-203-U/34	
		Name of law firm		

LINDA G. BAL ATTORNEY AT LAW, MBA Linda Bal Law Inc.

207 North Walnut Street • Itasca, Illinois 60143

630.285.0255 • Fax: 866.300.1077 Email: LindaBal@att.net

Bankruptcy Retainer Agreement

Cook

OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE US BANKRUPTCY CODE.

	In con	usideration for services to be rendered to undersigned Client(s),
		E T DAL AMENT
retain de bankru	Attorne ptcy m	cy, Linda G. Bal, ("Attorney"), in connection with representing Client regarding atters, Client, jointly and severally agrees to the following:
\$400 335 50 785	1.	The Flat Fee of \$\frac{400}{} for Legal Fees is required to be paid for representation of Client in Chapter 7 Bankruptcy Case. In the event that Client elects not to proceed with the bankruptcy filing, the Law office of Linda Bal Law Inc. will retain Three hundred dollars (\$300.00) of the initial retainer fee for administrative expenses plus earned fees, including legal fees billed at \$200.00 per hour and paralegal time billed at \$100.00 per hour, and refund any unearned balance.
·	2.	An additional \$335.00, payable to Attorney Linda Bal, for the Court Filing Fee of the Bankruptcy Petition.
	3.	An additional \$50.00 fee, payable to Attorney Linda Bal, for the Tri-Pull Credit Report, which will be used to assist our office in determining Client's credit card debt and Client's debt in collection.
	4.	An additional \$38.00 fee, payable to the Credit Counseling Class Company, for two Required Credit Counseling Courses (\$24.00 for first class and \$14.00 for second class – if taken on internet). This fee is to be paid directly to the Credit Counseling Course Company.
	5.	Client understands that Attorney will not do any work on client's file until Legal Fee (line 1), Court Filing Fee (line 2) and Credit

Report Fee (line 3) are paid in full.

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Linda Bal Law Inc. Bankruptcy Retainer Agreement Page 2 of 6

- 6. Client understands that the Bankruptcy Petition will be prepared for Client's review and signing within twenty one days (21) days after all the following are submitted to our office: (a) Legal Fee, (b) Court Filing Fee, (c) Credit Report Fee, (d) Client has submitted copies of all required documents and (e) Client has taken the first Bankruptcy Credit Counseling Class.
- 7. Once the Bankruptcy Petition is signed by the Client and filed with the Court, additional bills can be added to the Bankruptcy Petition through an Amendment for a fee of One Hundred Fifty Dollars (\$150.00) per Amendment. This fee must be received prior to filing the Amendment. Amendments can be filed with the Court up until the date of Final Discharge.
- 8. Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a Forty Dollar (\$40.00) NSF check fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash, certified check or money order.
- 9. Attorney reserves the right to withdraw from Client representation at any time, if among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same. If the Client refuses or is unable to do so, the Attorney is required to reveal the fraud to the affected person or tribunal.
- 10. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 11. Client agrees that Attorney's representation ends once the Order of Discharge on Client's Bankruptcy Case, is entered by the Court.
- 12. Client agrees that files will be retained by Attorney for three (3) years after the Order of Discharge is entered on the Client's Bankruptcy Case. Client further agrees that after this three year period has lapsed, Attorney will have Client's Bankruptcy file shredded.

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- 13. Attorney shall provide Client with the following services:
 - a. Review and analyze Clients financial circumstances based on information provided by Client.
 - b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Clients options, including but not limited to bankruptcy options.
 - c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
 - d. Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing.
 - e. Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include all typical Attorney required participation in such proceeding. Attorney Bal or one of her Associate Attorneys will attend the Meeting with the Trustee, 341 Meeting.
 - f. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided.
- 14. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.
- 15. Client acknowledges that he/she must take two Credit Counseling Classes. The Pre-Petition Class must be taken before the Bankruptcy is filed. The Post-Petition Class must be taken after the Bankruptcy is filed and client has been assigned Bankruptcy Case Number. Client acknowledges that their Bankruptcy cannot be finalized unless both Credit Counseling Classes are taken.
- 16. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Clients Bankruptcy case.
- Client acknowledges that only copies of documents are to be submitted to Attorney. No documents submitted to Attorney will be returned to Client.

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- 18. Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to the Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability.
- 19. Client agrees that the following matters are not included within the scope of this Flat Fee Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Clients behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
 - a. **Preparing Reaffirmation Agreements**, negotiating the terms of reaffirmation agreements proposed by creditors, motions to redeem personal property, and negotiating reaffirmation agreements when Clients income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
 - b. Removal of bank account freezes.
 - c. Removal of wage garnishments.
 - d. Getting creditors who have been discharged in their Bankruptcy to stop calling.
 - e. Correcting Credit Reports.
 - f. Obtaining title reports.
 - g. Removal of a pending action in another court. Motion to impose or extend the bankruptcy stay.
 - h. The determination of real estate or tax liens.
 - i. Motions to Discuss Clients bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
 - j. Any Adversary Proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargability of debts.
 - k. Appeals to the BAP, District Court of Court of Appeals.
 - 1. Negotiations with Check Systems regarding Client.
 - m. Mailing fee for clients who do not have email.
- 20. Client understands that certain debts cannot be discharged in bankruptcy. Client agrees that Client is still liable to repay any debt not discharged in Clients bankruptcy. Client understands that the debts listed below are common examples of the types of debts that cannot be discharged in bankruptcy. Client further understands that the list of non-dischargeable debts may be expanded by legislation or court decisions and Attorney has no control over the type of debts that may be or become non-dischargeable.
 - Taxes due to the IRS.

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- b. Student loans as defined by statute.
- c. Debts owed for spousal or child support.
- d. Debts owed to the spouse, former spouse, or child in a domestic relations proceeding.
- e. Debts arising from a previous bankruptcy wherein discharge of that particular debt was waived.
- f. Debts owed for money, property, services, extension-or-removal, or refinancing of credit, if obtained by false pretenses, or false representations, or actual fraud.
- g. Consumer debts for luxury goods obtained within ninety (90) days of the date of filing of the bankruptcy petition.
- h. Cash advances obtained within seventy (70) days of the date of the filing of the bankruptcy petition.
- i. Debts owed for fraud or defalcation while acting in a fiduciary capacity, or embezzlement or larceny.
- Debts owed for fines, penalties, or forfeitures payable to and for the benefit of governmental entity.
- k. Debts owed for death or personal injury arising from the operation of a motor vehicle, boat, or aircraft while intoxicated by drugs or alcohol.
- Client understands that filing bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Clients statements concerning ownership of real property and any liens attached to Clients real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Clients wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients real estate.
- 22. Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Clients case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
- 23. Client acknowledges that Client has read and understands all the terms contains in this Bankruptcy Retainer Agreement and that, whether written, spoken, recorded or transcribed by any other means, no other terms are made part of this Bankruptcy Retainer Agreement. Client is in agreement with the terms of this agreement and has signed on the signature lines below. Client further acknowledges that Client has received a copy of this Bankruptcy Retainer Agreement.

Lind Banl	Case 17-02861 la Bal Law Inc. kruptcy Retainer Agr e 6 of 6		Filed 01/31/17 Document	Entered 01/3 Page 52 of 55	31/17 18:53:24	Desc Main
	24. Client openir and co	ig, auc w	l be closed witho client's delay in	ut a refund if cas furnishing paper	se not filed within work or paying th	19 months of ne required fees
Date	d: <u>123(</u>	16				
M. Clien	lus OBa s t Signature	lolar	\	EL(SSA	Jo BADAL	AM EN T (
Client	t Spouse Signatur	re	Clie	nt Spouse Printe	d Name	
Attorn	ney at Law	<u>L</u>	<u> </u>			

Client Email Address _____ MELBADA998 @ gail. ca_

Client Phone Number ______ 708-638- (075

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United States Bankruptcy Court Northern District of Illinois

		Not the III District of Hillions		
In re	Melissa Jo Badalamenti		Case No.	
		Debtor(s)	Chapter	7
	VE	ERIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors: _	17
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	January 31, 2017	/s/ Melissa Jo Badalamenti Melissa Jo Badalamenti Signature of Debtor		

ADI Pediatric Behavioral Health 121 S. Wilke Rd., Ste. 403 Arlington Heights, IL 60005

Advocate Lutheran General Hospital PO BOX 4249 Carol Stream, IL 60197-4249

Alexian Brothers Health System Patient Financial Services 3040 Salt Creek Lane Arlington Heights, IL 60005

Allen Gabe Law LLC 1834 Walden Office Square, Ste 500 Schaumburg, IL 60173

AMITA Health 22589 Network Place Chicago, IL 60673-1225

CAPITAL ONE BANK USA N 15000 CAPITAL ONE DR RICHMOND, VA 23238

HARRIS 111 WEST JACKSON BOULEVARD CHICAGO, IL 60604

Harvey M. Wolf, M.D. 115 S. Wilke Rd., Ste. 300 Arlington Heights, IL 60005

Incar-Integgrated Imaging Consultan PO Box 95040 Chicago, IL 60694-5040

Magellan Behavioral Health Systems PO BOX 1959
Maryland Heights, MO 63043

Malcolm Gerald & Assoc. 332 S. Michigan Ave., Ste. 600 Chicago, IL 60604 MED BUSI BUR 1460 RENAISSANCE DR PARK RIDGE, IL 60068

OAC PO BOX 500 BARABOO, WI 53913

ONEMAIN FI 6801 COLWELL BLVD IRVING, TX 75039

Professional Placement Services PO Box 612 Milwaukee, WI 53201

Renee Burke M.D. 18 E. Dundee Rd., Bld3 200 Barrington, IL 60010

Superior Air Ground Amb Serv PO BOX 1407 Elmhurst, IL 60126